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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐

Declaration
Submitted
with Initial
Filing

OR

☒

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

J-3567A

First Named Inventor

Anita Wongosari

COMPLETE IF KNOWN

Application Number

10 / 712,509

Filing Date

November 13, 2003

Art Unit

Examiner Name



As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SEMI-ENCLOSED GEL DELIVERY DEVICE

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☒

was filed on (MM/DD/YYYY)

11/13/2003

as United States Application Number or PCT International

Application Number

10/712,507

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

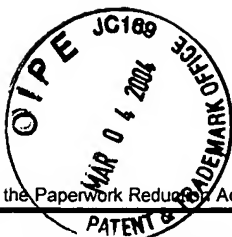
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:


[Page 1 of 2]



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PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>	Customer Number or Bar Code Label	28165	OR <input type="checkbox"/>	Correspondence address below
Name Robert A. Miller				
S.C. Johnson & Son, Inc.				
Address 1525 Howe Street, MS 077				
City Racine		State WI	ZIP 53403	
Country USA		Telephone 262-260-4975		Fax 262-260-4253
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Anita		Family Name or Surname Wongosari		
Inventor's Signature 		Date 02/06/2004		
Residence: City San Luis Obispo		State CA	Country USA	Citizenship ID
Mailing Address 111 Mustang Drive, Apt. #307				
City San Luis Obispo		State CA	ZIP 93405	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Michael C.		Family Name or Surname Liptrot		
Inventor's Signature		Date		
Residence: City Milwaukee Cambridge		State WI	Country USA UK	Citizenship USA UK
Mailing Address 626 E. Kilbourn Ave., Apt. 1402 4 Kinnaird Way				
City Milwaukee Cambridge		State WI	CB1 8SN ZIP 53203	Country USA UK
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>one</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				



Please type a plus sign (+) inside the box ☐

PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Padma Prabodh		Varanasi	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Racine	WI	USA	USA
Mailing Address 2 Cherrywood Court			
Mailing Address			
City	State	ZIP	Country
Racine	WI	53402	USA
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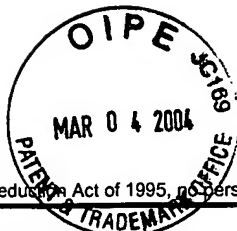
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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PTO/SB/01 (10-01)

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Name Robert A. Miller					
S.C. Johnson & Son, Inc.					
Address 1525 Howe Street, MS 077					
City Racine		State WI		ZIP 53403	
Country USA		Telephone 262-260-4975		Fax 262-260-4253	
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NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Anita			Family Name or Surname Wongosari		
Inventor's Signature				Date	
Residence: City San Luis Obispo		State CA		Country USA	
Citizenship ID					
Mailing Address 111 Mustang Drive, Apt. #307					
City San Luis Obispo		State CA		ZIP 93405	
Country USA					
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Michael C.			Family Name or Surname Liptrot		
Inventor's Signature <i>M. C. Liptrot</i>				Date 23/2/04	
Residence: City Cambridge		State		Country UK	
Citizenship UK					
Mailing Address 4, Kinnaird Way					
City Cambridge		State		ZIP CB1 8SN	
Country UK					
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>one</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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PTO/SB/02A (11-00)

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Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Padma Prabodh		Varanasi	
Inventor's Signature <i>Padma Prabodh Varanasi</i>		Date <i>12/11/03</i>	
Residence: City Racine	State WI	Country USA	Citizenship USA
Mailing Address 2 Cherrywood Court			
Mailing Address			
City Racine	State WI	ZIP 53402	Country USA
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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/712,507
Filing Date	November 13, 2003
First Named Inventor	Anita Wongosari
Title	Semi-Enclosed Gel...
Group Art Unit	
Examiner Name	
Attorney Docket Number	J-3567A

I hereby appoint:

☒ Practitioners at Customer Number

28165

Place Customer
Number Bar Code
Label here

☒ Practitioner(s) named below:

Name	Registration Number
Herbert W. Mylius	24,578
Carl R. Schwartz	29,437
Richard T. Roche	38,599
Steven J. Wietrzny	44,402

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

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Number Bar Code
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☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Anita Wongosari
Signature	
Date	02/06/2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of Three forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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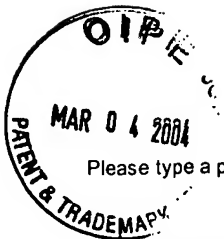
SIGNATURE of Applicant or Assignee of Record

Name	Michael C. Liptrot
Signature	<i>M. C. Liptrot</i>
Date	23/2/04

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Name

Padma Prabodh Varanasi

Signature

Padma Prabodh Varanasi

Date

12/11/03

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